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NUTRITION COMMITTEE NEWS

For exchange of information on nutrition education and school lunch activities.

U. S. DEPARTMENT OF AGRICULTURE, Washington, D. C. SEPTEMBER-DECEMBER 1959

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Nutritional problems faced by operators of homes for older adults deserve consideration by nutrition committees, because few such homes are large enough to employ a dietitian or other personnel fully qualified to plan, prepare, and serve food suited to the needs and tastes of their residents. On-the-job training, consultant service, and the volunteer assistance of dietitians and nutritionists have helped to improve the food service in many institutions. Even when food that looks good, tastes good, and is good for them is served, some residents still fail to eat an adequate diet. Sometimes the total intake of calories is low and in many instances nutritionally important foods are repeatedly rejected. In this issue we try to present some of these problems and practical suggestions for operators of homes for older folks.

The poor food habits of many oldsters probably were formed early in life. When nutrition committee members met in Milwaukee last June, concern was expressed for the nutrition of adolescents and young homemakers. Studies of the diets of young people indicate that the poor diets noted among them had a head start before the teen years. (NCN, July 1952.)

To avoid this situation, children should be taught what constitutes a good diet by learning experiences suited to their interests and maturity. Every effort should be made to convince them that a good diet pays off now and at compounded interest throughout life.

The 1960 White House Conference on Children and Youth affords a once-in-a-decade kind of opportunity to emphasize that nutrition education should begin early in life and to promote such education with the help of parents, teachers, psychologists, health and welfare workers, and others concerned with children. In this issue we report some of the current plans for a weeklong program and a brief account of how one nutrition committee, Illinois, has cooperated with other State groups in making Conference suggestions.

FEEDING OLDER FOLKS IN INSTITUTIONS

Institutions for the aged.—The number of institutions for the aged has grown with the increase in the percentage of older adults in the population according to the proceedings of the National Conference on Nursing Homes and Homes for the Aged (1). Most of these homes are privately owned and operated but are licensed by the State. Privately owned homes average about 18 beds, whereas the relatively few public homes are larger and average 69 beds.

Responsibility for maintaining standards of operation may rest with any one of a number of State agencies such as the Department of Health or the Department of Welfare. Licensing regulations concerning food service vary greatly. Some States have only sanitation regulations while others, such as California and Kansas, have set minimum nutritional standards.

Residents in homes for the aged average approximately 80 years of age. Two-thirds of all such residents

are over 75 and two-thirds are women. Less than half can walk alone and more than half have periods of disorientation.

Problems of feeding older folks.—Many persons concerned with the care and welfare of the aged have given long and careful thought to two major feeding problems; namely, the provision of a nutritionally good diet for the aged in institutions and means of getting them to eat it.

Many ideas have moved into action with varying success, and undoubtedly more groups have worked effectively on this problem than have reported.

PROVIDING AN ADEQUATE DIET

Research continues to add to our knowledge of nutritional requirements and some studies have been done on the diets and the nutritional status of the older adult (NCN, Nov.-Feb. 1955-56). There is general agreement that the older person requires fewer calories but his need for most other nutrients is similar to that of the younger adult.

Dietary surveys show that older folks usually are taking fewer calories than younger adults, sometimes not few enough, often too few, judging by weight for height and age. Their diets are also often low in one or more important nutrients.

Poor diets may be due to a number of conditions such as decreased income, loss of teeth, sensitive gums, dietary fads and prejudices, poor eating habits, low caloric intake, and the effects of chronic disease.

Group feeding.—The person responsible for the nourishment of senior citizens in a group situation faces a problem of great complexity. She must provide for nutritional needs while keeping in mind limitations imposed by physical or emotional disabilities. Some must be encouraged to eat less and others to eat more. If an individual's diet is radically different from those around him or from the food patterns he has enjoyed in his younger years, poor emotional adjustment may develop.

The nutritional problem is further complicated because few small institutions can afford to employ dietitians or managers with good experience in institutional feeding. Thus, the person planning menus may have a limited knowledge of how to meet the nutritional needs of the group.

Nutritional status can be maintained at desirable levels only if an adequate diet is available. In institutions where funds are low and menus are planned by persons with little understanding of nutrition, diets often furnish less than desirable amounts of important nutrients.

Voluntary assistance from nutrition consultants.—In some instances the operators of homes for the aged receive the voluntary help of nutrition consultants in planning meals to meet the nutritional needs of the group.

An example is the consultant service given to the New Jersey Eastern Star Home for the Aged. This home, which opened in November 1958, is equipped to care for approximately 36 women residents. The superintendent, who has a nursing background, is responsible for the food service. She had at her disposal the excellent food and nutrition materials developed and distributed by State agencies, but needed consultant help to make good use of them. She also wanted help with special problems.

Some consultant help was offered by a nutritionist who was a member of the Order of the Eastern Star of New Jersey. Each month she reviewed menus for 1 week. At first the consultant conferred in person with the superintendent at which time she made her suggestions and answered questions. Later, as the superintendent gained understanding and skill in menu planning, the consultant was able to handle the service largely by mail.

The items and size of servings in the first menus examined by the nutritionist indicated that meals were high in calories in proportion to iron, calcium, and ascorbic acid. To avoid excessive waste the menus had been planned to be consistent with the eating habits of the residents. The nutritionist's suggestions included the increased use of milk in the cooking as well as ascorbic acid- and iron-rich foods. Midmorning or midafternoon snacks of milk or citrus juice were also recommended.

Menus examined at a later date indicated greatly improved meal planning but the superintendent reported that the residents did not want a midafternoon snack. Without milk or citrus juice in the afternoon, the menus generally still fell short in calcium or ascorbic acid.

Once the staff realized that extra fruit juice or milk would improve the diet of the residents, they began to look for a way to provide it. Finally, the superintendent, without asking whether the women wanted it, placed a teacart with plain cookies, citrus fruit juice, and milk in the television room in the evening. The women soon began having an evening snack as they watched their favorite programs.

Each set of menus submitted for examination showed improvement as the superintendent became more experienced in planning for the nutritional needs of her clientele in terms of foods they would eat and appeared to enjoy.

She and her staff encouraged individuals to eat small portions of unfamiliar and previously rejected foods.

The superintendent reported recently that all the women were maintaining their weight and only the former underweights were showing weight gains.

Assistance from various agencies.—Many local, State, and national agencies have developed materials and procedures designed to help operators of institutions for the aged to meet the nutritional needs of the residents.

In Utah, for example, the State Health Department, which licenses nursing homes, has an educational program. Prior to the operator's examination by the Registration Department limited instruction is given in sanitation, nursing, and nutrition. One 2-hour class given by the Department's Nutrition Section was devoted to food needs and dietary management problems. The operators requested more help in this area and a second class was given.

A quarterly leaflet, "Off the Shelf," is distributed to nursing home operators, which is a media for answering questions, discussing problems, and giving nutritional information. Quarterly suggestive menus considering availability of foods and seasonal variation are also sent to the operators.

One nursing home operator, reporting on her program for the future, made it evident that many of the ideas that had been presented for improving food practices among residents were incorporated into the operational plan for food service in her institution.

In other States, among which are Wisconsin, North Carolina, and New Hampshire, more ambitious programs have been initiated. Workshops or institutes for managers and food service personnel have been conducted by various agencies. (NCN, July-Aug. 1956.)

New Hampshire, for example, has conducted 1-day workshops at regular intervals, and has requested institutions to report semi-annually on food purchases (2). Reports in which this information was analyzed, including a comparison with recommended allowances of nutrients, were distributed so that operators of homes could see the extent to which they were meeting the nutritional recommendations. In 1958 several New Hampshire health, education, and welfare agencies, a citizens committee, and the U. S. Public Health Service sponsored a pilot study of conditions, including those relating to food and nutrition, in the Strafford County Home (3). It was believed that the recommendations for improvement in the Strafford County Home could be suggestive to operators of other homes where similar conditions existed.

ENCOURAGING RESIDENTS TO EAT AN ADEQUATE DIET

Making sure that a suitable assortment of food is available to oldsters represents only one problem. A second major problem facing those responsible for the nutrition of older adults is that of getting them to eat the variety of food in appropriate quantities. In a home for the aged in the Southeast, Brine and Tate (4) found that losses in food amounted to 30 percent of the total calories and in one home in the Northeast it came to 21 percent. Plate losses accounted for much of the total loss.

Habits of 80 years are not easily changed, but modification of habits is possible if encouragement, patience, and perseverance are used along with understanding of the emotional and physical limitations that may appear with advancing age.

Efforts made in two different institutions to promote improved food practices among their clientele are discussed below.

Individualized Service

The Daughters of Miriam Home and Infirmary for the Aged, Clifton, N. J., has 160 residents, both men and women, about 95 percent of whom came to America, as adults, from Eastern Europe. Their physical conditions range from relatively self-sufficient to totally incapacitated.

The home has three major divisions; namely, residential, custodial, and infirmary. Those who are relatively self-sufficient live in the residential section, persons who show initial or progressive symptoms of senility with relapses or remissions in behavior are housed in the custodial wing, and the incapacitated are cared for in the infirmary.

Because of the many-faceted character of the feeding problem, a highly individualized type of food service was initiated. Residents may be spoon fed, may have tray service in their rooms or in the solarium on their floor, or may be served family style in a restricted dining room or central dining room.

The type of food service a person receives depends on

his particular needs and may vary from day to day or by meals. Even in the infirmary the type of feeding ranges from spoon feeding in bed to tray service in the solarium or to attendance in the dining room (this is the exception rather than the rule). For example, an infirmary patient and his wife living in the residential wing may eat together once or twice a day.

To maintain such individualized service calls for careful organization in order to avoid food waste in some areas and shortages in others. In fact, the executive director of the Home reports that they could not do it without the help of the American Red Cross of Passaic, N. J. Five days a week Red Cross workers assist with the food service. In 1958, 25 workers contributed 1,457 hours of direct service to residents. This represents only about 9 months worktime for one full-time employee but, because help is available when and where it is needed, a more suitable type of meal service is made possible. One full-time worker could not do what 25 strategically placed part-time workers can do.

Having achieved individualization in the type of food service offered, the Home personnel is now ready, with dietary consultant help from the New Jersey Hospital Association, to increase emphasis on urging residents to eat a wider variety of nutritionally important foods. The plan is for personnel to work with the House Council of Residents for the purpose of "balancing habit with change."

Educational programs for dining room staff and residents.—Even when it is not possible for an institution to provide highly individualized food service, residents can be encouraged to eat the food that is served by making them feel that they are important as individuals.

In the Orthodox Jewish Home for the Aged, Chicago, Ill., the dietitian recognized the role waitresses could play, especially in helping new residents become adjusted to group living (5). Each person was assigned a permanent place at a table for four with the same waitress serving him regularly. Waitresses were trained to take an interest in the residents and to observe food preferences as well as the size of portions each one enjoyed. Residents felt important and "at home" when waitresses remembered and served their preference in bread, cereal, or beverage.

Frequent meetings were held with the dining room staff to discuss problems of approach, attitudes, and responses to the various residents. As the staff increased its understanding of the process of aging, the success of dining room procedures increased.

Meetings were also held with residents to interpret the dietary procedures and problems. When the reasons for dietary restrictions were explained, residents tended to accept them more readily.

Persons entering the home brought with them food habits of long standing and often poor adjustment to the new situation which led to an inadequate intake of important nutrients. The dietitian made every effort to offer foods of high nutritional value in acceptable form. Obtaining acceptance of unfamiliar or previously rejected food was a slow educational process but some measure of success was achieved.

When a new food item was served, announcement of it was made over the loud speaker, along with its ingredients and similarity to familiar foods. Food waste was a problem but, in the interest of developing improved food habits, moderate rejection of a food the first time it was served did not eliminate it as a possibility. It was served again after a fair lapse of time. The staff was successful in adding to the menus a variety of green and yellow vegetables, both cooked and raw. At first small portions were served. As acceptance of the food developed the size of portions was increased.

The staff observed and reported the foods that seemed to be eaten with enjoyment. These foods were served more often.

A National Problem

National Conference on Nursing Homes and Homes for Aged.—The Public Health Service called a conference, February 25-28, 1958, to review the problems of nursing homes and homes for the aged and to consider the future role of such institutions as health resources of the Nation.

Nutrition of older adults was one of the problems considered. Experts from the fields of nutrition and institution management examined the various phases of the problem in terms of current procedures and possible ways of improving practices.

Among several recommendations made were these: Meals served in homes should meet the dietary allowances for older adults recommended by the National Research Council. Food should be of acceptable quality. A minimum of three meals daily should be available with not more than 14 hours between the evening meal and breakfast. Type of meal service should meet the needs of the residents, with table service for those able to enjoy it and tray service for the incapacitated.

Of particular interest, however, are these recommendations for responsibilities of State licensing agencies: (1) Preparation and distribution of materials containing information on selection and use of kinds and amounts

of food at varying cost levels; (2) education and training in all phases of food service for all personnel in homes; (3) familiarity of the entire licensing staff with the criteria for evaluating the food service; and (4) provision of specific assistance for operators of homes with problems of food service.

LITERATURE CITED

1. National conference on nursing homes and homes for the aged. U. S. Dept. Health, Education, and Welfare, Report, Public Health Service, 1958.

2. Food Analysis N. H. State Institutions. January 1955. N. H. Cooperating Department; Health Purchase and Property, Administration and Control. Concord.

3. Portrait of an aging population. Pilot study Strafford County Home. Dover, New Hampshire. N. H. Health Department. Concord. 1958-1959.

4. Effect of food losses and nutritive content of the diet. C. Brine and E. Tate. Amer. Dietet. Assoc. Jour. 32(1)19:23, 1956.

5. Serving the aged. S. Heend. Amer. Dietet. Assoc. Jour. 31(4)376:380, 1955.

NUTRITION COMMITTEE MEMBERS MEET IN MILWAUKEE

State and local nutrition committee members met for breakfast and discussion on June 23, 1959, during the 50th annual meeting of the American Home Economics Association. The program was planned cooperatively by the Illinois State Nutrition Committee, the Chicago Nutrition Association, and the Interagency Committee on Nutrition Education and School Lunch. Miss Jean Hankin, then nutritionist with the Milwaukee City Health Department, made the necessary local arrangements.

The meeting was attended by about 75 persons representing 14 States and the ICNESL. Miss Mary Egan, ICNESL Chairman for 1959-60, presided. Guest speakers were: Dr. Floy Eugenia Whitehead, Professor and Chairman of the Department of Home Economics, University of Iowa; Dr. George Denemark, Dean, Milwaukee Branch, University of Wisconsin; and Miss Nina Edelblute, Assistant Professor of Research and Education and School Lunch, Kansas State College. The guest speakers were introduced by Miss Ruth Yakel, President of the Chicago Nutrition Association, in the absence of Dr. E. E. Rice, Program Chairman.

HIGHLIGHTS OF THE DISCUSSION

Teacher Preparation in Nutrition Education

Current concern.—Poor food habits, especially among adolescents, and the prevalence of food fads concern nutritionists at the present time. Early marriage and the early age at which girls become mothers make it essential that girls and young women receive information on adequate nutrition that will motivate them to provide good diets for themselves and their beginning families.

Failure on the part of curriculum planners to recognize the opportunity for all schools including teacher education institutions to provide nutrition education is cause for further concern. Administrators, classroom teachers, and parents must be shown the facts which reveal the need—the urgent need for nutrition education programs to reach all groups in the population with high priority given to children and adolescents.

Nutrition in Teacher Education

There seems to be general agreement that nutrition should be taught in elementary schools by classroom teachers and in secondary schools by qualified persons in conjunction with home economics, health, and science courses. Preparing the teacher to work effectively in nutrition poses a number of problems for teacher education institutions. In some States, nutrition courses are a prerequisite for certification; in others, nutrition courses are elective. The content of these courses in terms of basic nutrition and educational approaches should be planned by specialists in nutrition and teacher education.

Educational approaches and nutrition information that teachers can use in their particular classroom situations should be included. Systematic knowledge about nutritional needs and nutritive values of foods is needed to understand the importance of regular meals, how to get the most for the food dollar, and to discriminate between food facts and fallacies. Teachers need to learn where to obtain sound source materials and current nutrition publications. They also require help in interpreting and adapting nutrition information to the

needs and interests of their particular classes in a manner consistent with the "laws of learning" and current knowledge of habit formation.

For several decades educators have been adding new subjects or new content to the curriculum as a result of the pressure from many different special interest groups. It has now become essential to reexamine the overcrowded curriculum in terms of current needs and goals.

It would seem that the time has come for nutritionists and teacher educators to form joint curricula study groups at local, State, and national levels in an effort to develop a program of general education which includes nutrition. The curriculum planner must make the final decisions concerning course content but the nutritionist can help by suggesting basic nutrition principles and some activities which should be included at each level of the teacher's preparation.

Alternatives to a Required Course in Nutrition for Teachers

Carefully planned courses in nutrition for teachers have offered sound basic nutrition information and suitable techniques for including nutrition in school programs. In some instances teachers have had the opportunity to participate in activities that give them confidence in teaching nutrition to their classes and to develop facility in including nutrition education in many areas of the curriculum.

Whether a specific course is afforded, or the subject matter is introduced through established courses, the curriculum must seek to:

1. Promote an interest in nutrition among beginning teachers;
2. Encourage more teacher education institutions to offer courses in nutrition or to incorporate nutrition into existing courses;
3. Provide teachers with experiences which give them confidence in teaching nutrition to their classes;
4. Help teachers gain the understanding and skill to project nutrition education into the curriculum in various ways;
5. Promote research designed to discover what to teach, which motivations to employ, and the techniques to use with various age groups. The research needs to be a joint effort of nutritionists and educators.

WHITE HOUSE CONFERENCE ON CHILDREN AND YOUTH

March 27-April 2, 1960

On March 27, 1960, some 7,000 delegates, at the invitation of the President, will gather in Washington, D. C., to spend 5 days considering virtually every question that affects the well-being of children and youth. This is the golden anniversary of the first White House Conference, 1920, which established national responsibility in setting minimum health and welfare standards for mothers and children.

Purpose

The purpose of the 1960 Conference is "to promote opportunities for children and youth to realize their full potential for a creative life in freedom and dignity."

Attention will be directed toward (1) the effects of our rapidly changing world on the development of the young, (2) appraising and reappraising the values and ideals by which we live, and (3) studying the factors that influence individual fulfillment such as family, religion, education, health, and community life.

Everybody's Responsibility

Many groups have joined for action in preparation for this great undertaking. President Eisenhower appointed a National Committee of 93 citizens. There are 54 committees in States, territories, and the District of Columbia, each of which is represented on the National Council of State Committees. Representatives from 34 divisions of the Federal Government make up an Interdepartmental Committee on Children and Youth. Each group has the responsibility to work out with its regional staff the best manner in which it can participate in State and local communities or enterprises.

Nutrition Committees.—Nutrition committees can volunteer their services as resource agencies for the State Committee on Children and Youth on nutrition and related problems.

For example, the Illinois Nutrition Committee (INC) appointed a special subcommittee to consider the role of INC as a cooperating agency.

A letter calling attention to the necessity of good nutrition to the health of our young people was written to the executive secretary of the Illinois Commission on Children—the person responsible for coordinating the organizational activities for Illinois.

As a result, INC was one of the cooperating agencies making specific suggestions for areas of study, which were forwarded to Washington, D. C., from Illinois.

Aim.—Everyone, by acting through his local, State, and national organizations in cooperation with the National

Committee, may share in these meetings. Preconference materials are being developed and plans are being made to carry out the recommendations of the conference in the decade that follows.

This fifth conference is to be more than the 5 days of meetings, it is to be the start of a "process of earnest study and action that continues until the next conference in 1970."

MATERIALS

Listing of these materials is for the information of readers and does not necessarily mean recommendation. Materials or information on them may be obtained from the addresses given. Symbols refer to—

GPO—Superintendent of Documents, Government Printing Office, Washington 25, D. C.

USDA—Office of Information, U. S. Department of Agriculture, Washington 25, D. C.

Food Production, Purchasing, Equipment, Preparation, and Service

Turkey on the table the year round. U. S. Dept. Agr. Home and Garden Bul. 45, Rev. 1958. USDA.

Fun foods for snack time. 4 pp. Wash. State Dept. Health, Div. Child Health Serv. Olympia.

Sun dry your fruits and vegetables. A guide for home economists around the world. H. Strow and E. Spindler. U. S. Dept. Agr., Fed. Ext. Serv., 27 pp., Washington 25, D. C. 1958.

Pork in your meals. U. S. Dept. Agr. PA 405. 28 pp. 1959. USDA.

The Beltsville kitchen-workroom with energy-saving features. U. S. Dept. Agr. Home and Garden Bul. 60. USDA. 1958.

Growing vegetables in town and city. U. S. Dept. Agr. Home and Garden Bul. 7. USDA. 1958.

Seeds and more seeds. Millicent E. Selsam. Harper Bros., N. Y. $1.95. 1959.

Buying practices and food use of employee food services in manufacturing plants. U. S. Dept. Agr. Marketing Research Rpt. 326. 1959. USDA.

Employee food services in manufacturing plants. U. S. Dept. Agr. Marketing Research Rpt. 325. 1959. USDA.

Nutrition

Fatty acids in food fats. V. R. Goddard and L. Goodall. U. S. Dept. Agr. Home Econ. Res. Rpt. 7. GPO. $.05. 1959.

Evaluation of protein malnutrition—a report of the food and nutrition board. Publ. 711, 61 pp. National Academy of Sciences—National Research Council. Washington, D. C. 1959. $2.00.

Information Please

We are contemplating one or more issues of NCN covering the role of nutritionists in the preservice nutrition education of such health and welfare personnel as physicians, dentists, nurses, social workers, and perhaps others. The coverage will depend on the response we receive from you.

It will be more interesting and helpful coverage if you, our readers, will share your teaching experiences in this area with us or direct us to persons who are teaching courses of this nature.

We need, for possible inclusion in the proposed article, detailed descriptions of actual courses including course content, teaching procedures, and any laboratory and field experience. We are interested in courses that have proved to be effective. Sometimes it is helpful to know of a course, method, or project that has been successful in one area and not in another. In such instances it is well to know what appeared to be the stumbling blocks.

MARY M. HILL.

Vitamin preparations as dietary supplements and as therapeutic agents. Council on Foods and Nutrition. Reprinted from Jour. Amer. Med. Assoc., 169, 41:45, 1959. Available from Amer. Med. Assoc., 535 Dearborn St., Chicago 10, Ill.

Applied Nutrition

Eating and growing. Washington State Dept. of Health, Olympia. 4 pp. 1958.

Food facts for teens. Univ. Calif. Agr. Ext. Serv., Berkeley. 1959.

Food needs for teens. Univ. Calif. Agr. Ext. Serv., Berkeley. 1959.

Improving teenage nutrition. Assembled by 4-H and Nutrition Development Committee. Fed. Ext. Serv. U. S. Dept. Agr. 1959. (Available as long as supply lasts.)

Girls "Twixt Twelve and Twenty"—consider what you are eating. 4 pp. Available—State Dept. Health, Oklahoma City 5, Okla.

Teenage food habits. Leaflet 268. 1959. Ext. Serv. College of Agr. Rutgers—State Univ., New Brunswick, N. J.

Nutrition in pregnancy. Symposium. Council on Foods and Nutrition, Amer. Med. Assoc. 535 Dearborn St., Chicago 10, Ill. 1958.

Food guide for older folks. U. S. Dept. Agr. Home and Garden Bul. 17. Rev. 1959. USDA.

Eat a good breakfast to start a good day. U. S. Dept. Agr. Leaflet 268, 7 pp. Rev. Apr. 1959. USDA.

Nutrition Education

Promising practices in nutrition education in the elementary school. W. J. Jacobson, F. L. Boyd, M. M. Hill. 46 pp. Bureau Publications, Teachers College, Columbia Univ. New York 27, N. Y. 1959.

Successful nutrition education in elementary schools. Willard F. Jacobson. Federation Proceedings 18(2)-121:128, Part II, 1959. Federation of American Societies for Experimental Biology, 9650 Wisconsin Ave., N. W., Washington 14, D. C.

The role of nutrition education in combatting food fads. Symposium. Joint meeting of the Nutrition Foundation, Inc., with Institute of Food Technologists, Northern Calif. Section, Inc. Available from The Nutrition Foundation, Inc., 99 Park Ave., New York 16, N. Y.

Research relating to children. U. S. Dept. Health, Educ., and Welfare. Soc. Sec. Admin. Bul. 10. GPO $1.00. 1959.

Health education in the elementary school. Carl E. Willgoose. 1959. 450 pp. W. B. Saunders Co., Phila., Pa. $5.25.

Teaching nutrition in the elementary school. M. A. Banks, M. A. Dunham. (E. A. Wilson, Consultant.) 1959. Amer. Assoc. for Health, Education and Recreation. National Education Assoc., 1201 Sixteenth St., N. W., Washington 6, D. C. $.75. 2-9 copies 10 percent discount. 10 or more—20 percent discount.

Food intakes of 2,189 women in five north central States. Iowa Agr. and Home Econ. Expt. Sta. Iowa State College, Ames, Iowa. Res. Bul. 468, May 1959.

Nutritional status USA, Bul. 769 Calif. Agr. Expt. Sta., Berkeley. 130 pp. 1959.

Nutrition Publications in Spanish

Nutrician al dio. 8 pp. Department of Health, San Juan, Puerto Rico. 1959.

Alimentos para tu dieta boja en sodio. 18 pp. Department of Health, San Juan, Puerto Rico. 1958.

Guia para pacientes diabeticus. 20 pp. Department of Health, San Juan, Puerto Rico. 1958.

Budgeting and Management

Low cost diet—getting the most for your food dollar. 13 pp. Ga. Dept. Pub. Health, Atlanta. 1958.

Home economics handbook. Information for helping people with money and home management. F. J. Bracken. Baltimore City Dept. Pub. Welfare, 1500 Government Ave., Baltimore 2, Md.

Institution Management

Manual of forms and procedures for use by homes for the aged. 1959. Federation of Protestant Welfare Agencies, Inc. 251 Fourth Avenue, New York 10, N. Y. $.50.

Menu-maker for homes for the aged. Reissued 1958. Available from Federation of Protestant Welfare Agencies, Inc., 251 Fourth Avenue, New York 10, N. Y.

Civil Defense

Individual and family survival requirements. Advisory Bul. 234, prepared by IHE, USDA, for Office of Civil Defense Mobilization. (Available from State or local or Civil Defense Agency.) 1959.

Food Misinformation

Your campaign kit to combat food faddism and false claims. Amer. Med. Assoc., 535 N. Dearborn St., Chicago 10, Ill. May 1959.

Visual Aids

Selected films on child life. Children's Bureau Pub. 376, U. S. Dept. Health, Education, and Welfare, 1959. GPO $.30. 25 percent discount on 100 or more.

ATTENTION

Return the enclosed card with your CORRECT ADDRESS if you want to continue to receive Nutrition Committee News. Government regulations require that once a year we make sure copies are sent only to those who want to continue receiving them.

If we do not hear from you within 30 days, we shall assume you wish us to remove your name from the mailing list.

We should appreciate the information concerning your occupation and nutrition committee (Federal, State, county, or city) membership. One use of this information is to select content material of interest to our readers.

Institute of Home Economics, Agricultural Research Service, U. S. Department of Agriculture, in consultation with the Interagency Committee on Nutrition Education and School Lunch. (The printing of this publication has been approved by the Bureau of the Budget, May 22, 1958.)